PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/567,150

| | | CLAIMS | AS FILED | - PART I | , | | | _/_ | | |
|---|-------------|---|--------------|---|---------------------|--------------|--|------------|--------------------------|--|
| L | | · · · · · · · · · · · · · · · · · · · | (C | Column 1) | (Column 2) | SMALL ENTITY | | OF | OR LARGE ENTITY | |
| U.S. NATIONAL STAGE FEES | | | | | | RATE | FEE | 7 | RATE | FEE |
| BASIC FEE | | | | | | BASIC FEE. | | OR | BASIC FEE | ┥ |
| EXAMINATION FEE | | | | | | EXAM. FEE | | | EXAM. FEE | 300 |
| SEARCH FEE | | | | | | SEARCH FÉE | | 1 | SEARCH FEE | 200 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | / 50 = | X \$ 125.= | | 1 | X \$ 250 = | 70 |
| TOTAL CHARGEABLE CLAIMS | | | 9 minus 20 = | | | X \$ 25 = | | | | |
| INDEPENDENT CLAIMS | | | 1 | minus 3 = | | X \$ 100 = | | OR | | |
| MULTIPLE DEPENDENT CLAIM PRE | | | | | | + \$ 180 = | | OR | | |
| * If the difference in column 1 is less than zero, enter "0" in col | | | | | a column 2 | TOTAL | | OR | L | 360 |
| | | | | s, s.n.s. s n | r column z | TOTAL | <u>·</u> | OR | TOTAL | 1260 |
| AMENDMENT A | | (Column 1) CLAIMS REMAINING AFTER | | (Column HIGHES NUMBE PREVIOUS | T PRESENT SLY EXTRA | SMALL E | ADDI- TIONAL | OR | OTHER SMALL E RATE | |
| | Total | * | Minus | PAID FO | R . | X \$ 25 = | FEE | 0.5 | | FEE |
| | Independent | * | Minus | *** | | | | OR | X \$ 50 = | ļ |
| | FIRST PRES | ENTATION OF N | <u> 1</u> | ENDENT CLA | | X \$ 100 = | | OR | X \$ 200 = | <u> </u> |
| | L | | | ELIDENT CEX | | + \$ 180 = | | OR | + \$ 360 = | |
| | . • | • | | N. | | FEE | | OR | TOTAL ADDIT. FEE | |
| | | | | | | | | - | • | t. |
| X I | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUS PAID FOR | PRESENT LY EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | = | X \$ 25 = | | oR | X \$ 50 = | |
| | Independent | * | Minus | *** | = | X \$ 100 = | | - | X \$ 200 = | · |
| | FIRST PRES | ENTATION OF M | ULTIPLE DEPE | NDENT CLAI | м . | + \$ 180 = | | ⊢ | + \$ 360 = | • |
| | | | | | | | 1 | | 7 000 | |

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.